



Testimony of Neil Richardson, Deputy Director
DC Appleseed Center for Law and Justice

Council of the District of Columbia
Committee on Health & Committee on Hospital & Health Equity
Hearing on Direct Care Worker Amendment Act of 2023 (B25-565)

March 13, 2024

INTRODUCTION

DC Appleseed is a non-profit research and advocacy organization dedicated to making the District a better place to live and work. For over 25 years, DC Appleseed has worked to improve the District, paying particular attention to the needs of our most vulnerable residents including children, older adults, and people who are medically underserved.

BACKGROUND

My name is Neil Richardson, and I am the Deputy Director at DC Appleseed. Today, I am also testifying in my capacity as the Acting Coordinator of the DC Coalition on Long-Term Care. The Coalition works to expand and improve the quality of long-term care programs and ensure that District residents living on low incomes and with disabilities can age in the community safely and with dignity. The Coalition comprises over 80 organizations and stakeholders, bringing together consumers, advocates, and healthcare providers to work with the District government on long-term care issues. DC Appleseed supports the efforts of the Coalition to ensure all DC residents can access affordable and appropriate care, and their efforts to improve training, work conditions, and compensation for DC's long-term care workforce.

Across the country and in the District, we are in a workforce crisis regarding direct care health workers. Nearly a third of all the workers left the job last year (4500 workers) according to data from the Board of Nursing. The shortage of long-term care services disparately impacts individuals who cannot afford to pay for care privately. Despite educational and certification requirements and the skills needed to do these jobs well, the pay scale is at or below retail and other jobs that have lower entry level requirements and involve less physical labor, mental stress and skill. As well, the workers who provide direct care services like Home Health Aides and Certified Nursing Assistants are almost exclusively black, brown and female and have historically been underpaid and undervalued. Consistent and quality care should be provided to ALL no matter where they live, what they look like, or their economic status. We must act on this workforce crisis...now!

Here are the numbers:



1. 36,000 DC residents require some form of direct service health care.
2. 19,500 are between 18-64 years old.
3. 16,500 are 65 years and over and unable to live independently.
4. These numbers are projected to increase by 10% every five years.
5. Over 50% of home health agencies state that they do not have enough aides to staff all their shifts.
6. One out of three people can NOT get the care they need because there are not enough workers.
7. One third of ALL nursing assistants and home aides left the job last year according to the Board of Nursing.

RECOMMENDATION

The DC Coalition on Long Term Care and DC Appleseed Center for Law and Justice Enthusiastically Support the Direct Care Worker Amendment Act of 2023 -B25-0565.

The Direct Care Worker Act Amendment of 2023 provides a set of common-sense steps to address the crisis. Specifically:

- Establish a new minimum wage that is not less 120% of the District Living Wage for all direct care workers (approximately \$20.40 an hour). Wage and job quality are the reasons most workers give when asked why they are leaving the profession. Professionals in direct service work are required to attain more than a hundred hours of training and credentialing. The demands placed on these workers both physically and mentally are immense and the pay is usually minimum wage or a little higher if someone can work overtime. When compared to similarly paid jobs working in retail, the variety of delivery services or even dog walking and which require little to no formal training it is amazing anything chooses this career. These workers deserve to be paid like the essential jobs they are.
- Require DC Health to establish a new universal credential for direct care workers that combines home health aide and certified nursing assistant competencies. The differences in job responsibilities are few beyond one position is primarily based in hospitals and the other in people's homes. Nursing Assistants receive 130 hours of training and Home Aides receive 120 hours. We believe that to ensure maximum flexibility and portability, the training and credentialing process should be combined as is done in other states.



- Allow Maryland and Virginia health aides and nursing assistants to work in DC. DC will not be able to recruit and train enough workers to replace the thousands of workers who have not returned to the job. We do not have the training capacity to train enough workers, there are only 5 accredited training agencies on the DOH website and even if fully enrolled this comes out to less than 250 people who could be trained and accredited. Currently, most or all of the programs are not fully enrolled and not every person who undergoes the 120-130 hours of training achieves a credential. During the COVID Public Health Emergency, Mayor Bowser approved waivers for workers from other states to work in DC. The current workforce shortage requires that we act now.

THANK YOU.